



AUGUST 6, 2024

Agenda Subject to Change. All Times Central (Chicago)

WEDI Welcome

8:30am – 8:45am

Teamwork Makes the PA and Interoperability Dream Work: An Industry Panel

In this insightful panel discussion, leaders from key industry organizations will explore how they are responding to the CMS Interoperability and Prior Authorization Rule and the steps they are taking to educate their members on these significant changes. Join us for a comprehensive exploration of the collaborative efforts and proactive measures being taken to navigate this pivotal regulatory change and gain valuable knowledge to help your organization thrive in the evolving healthcare landscape.

8:45am – 9:30am

- Andrea Preisler, Senior Associate Director, Administrative Simplification Policy, American Hospital Association
- Heather McComas, Director, Administrative Simplification Initiatives, American Medical Association
- Karuna Relwani, Business Interoperability Lead, Health Information Technology, Blue Cross Blue Shield Association
- Danielle Lloyd, Senior Vice President, Private Market Innovations & Quality Initiatives, America's Health Insurance Plans

CMS PA and Interoperability Feedback Session

9:45am – 10:30am

Receive updates and offer your thoughts to Alexandra (one of the lead authors of CMS-0057-F) on how your organization is addressing the final rule and any questions or issues you have.

- Alexandra Mugge, Chief Health Informatics Officer, Director of the Health Informatics and Interoperability Group, Centers for Medicare & Medicaid Services
- Lorraine Doo, Senior Policy Advisor, Health Informatics and Interoperability Group, Office of Burden Reduction and Health Informatics, Centers for Medicare & Medicaid Services

Morning Networking Break

10:30am – 10:45am

Integrating FHIR & EDI: Creating Dual Strategies for Health Plan Success- presented by edifecs

10:45am – 11:30am

This session explores how health plans can leverage existing capital investments to develop a comprehensive strategy that integrates FHIR's flexibility for real-time data access and interoperability with existing EDI infrastructure to help optimize operations and enhance member care (e.g. CMS 0057-F).

- Kevin Day, Principal Business Advisor, Edifecs

Vendor Prior Authorization Panel

WEDI welcomes solutions experts to discuss what they are hearing from their clients in terms of implementation. How are they interpreting and implementing the final rule with their customer communities and how are they communicating the rule to their clients who are not required to implement the rule?

11:30am – 12:15pm

- Kevin Day, Principal Business Advisor, Edifecs
- Daniel Cawood, Product Manager, Interoperability Solutions, MCG Health
- Matt Cunningham, Executive Vice President of Product, Availity
- Michael Lunzer, Co-Founder, CEO, Itiliti Health

Forum Lunch and Small Group Table Discussions: *What will it take for the industry to move together? What can we do to make this PA implementation a success for everyone?*

Enjoy lunch and have in-depth, informal discussions on key HIT issues (Available for Chicago audiences only)
12:15pm – 1:00pm

Payer Prior Authorization Panel

Payer organizations address their current state (including the digitization of their PA policies) and anticipated challenges/considerations as they begin the process of addressing the final rule.

Moderated by  **InterSystems**
Creative data technology

1:00pm- 1:45pm

- BCBS South Carolina
 - Gregg Johnson, FHIR Team Lead and Product Owner
 - Richard Abercrombie, Lead Developer
- Cambia Health Solutions
 - Kirk Anderson, Vice President & Chief Technology Officer, Cambia Health Solutions

Moderated by Steve Berkow, Senior Advisor, Value Based Markets, InterSystems

Provider Prior Authorization Panel

Challenges connecting to multiple health plans. Development of their PA workflow? What are the thoughts from smaller providers? We invite provider organizations to address these questions while showcasing the value of the final rule.

2:00pm- 2:45pm

- Semira Singh, Director Population Health Informatics, Providence
- Anna Taylor, AVP, Population Health & Value Based Care, MultiCare Connected Care

Afternoon Networking Break, Sponsor Showcase

2:45pm – 3:15pm

Charting the Course: MHDC's Journey to Prior Authorization Transformation

3:15pm – 4:00pm

The Massachusetts Health Data Consortium (MHDC) is leading efforts to implement electronic prior authorization (ePA) by January 1, 2027 (the CMS deadline). In partnership with Point of Care Partners (POCP) and ZeOmega, MHDC is launching NEHEN 3.0, focusing on ePA and quality measures exchange. Join MHDC, POCP, and ZeOmega to discuss the progress and future of this initiative.

- Denny Brennan, Executive Director, Massachusetts Health Data Consortium (moderator)
- David Delano, Senior Director of Services, Massachusetts Health Data Consortium
- Alix Goss, Senior Consultant, Point-of-Care Partners
- Michael Gould, Associate Vice President of Interoperability Strategy

Summer Forum Small Group Exercise

4:00pm – 5:00pm

What priorities, resources and initiatives can WEDI develop and offer through its Strategic National Implementation Process (SNIP)? What will help you in your compliance journey and how can the industry excel in this new API environment?

WEDI Happy Hour, Gino's East, 162 Superior Street, Chicago, IL

5:30pm – 7:30pm



AUGUST 7, 2024

X12 Updates to New HIPAA Standards

8:00am – 8:30am

X12 will provide an update on current initiatives, recent developments, and share summary findings from its HIPAA Recommendations Proof of Concept (PoC) Program. Over the past several months, the PoC group has honed in on identifying potential operational and technical challenges for implementers when relying on related transactions with different versions or who are undergoing a transition period to the new version. X12 will provide a summary of a few key categories of changes between the current and proposed new versions along with guidance on how to prepare for them.

- Cathy Sheppard, CEO, X12
- Andrew Fitzpatrick, Operations and Licensing, X12

WEDI Claims/ Remittance Survey Findings and Discussion

8:30am – 9:30am

In June, WEDI conducted a survey gathering input from stakeholders to rate the potential business value and impacts of the features included in the next version of the X12 837 and 835 transactions that were recommended to be updated. This session will review the results of the survey and prepare information to share with CMS on those results.

- Pam Grosze, Co-Chair, WEDI Remittance, Payment & Advice Sub Workgroup. Vice President, Senior Product Manager, PNC Bank
- Patricia Wijtyk, Co-Chair, WEDI Remittance, Payment & Advice Sub Workgroup. Senior Associate, BPO, EDI Team, Cognizant
- Stanley Nachimson, Co-Chair, WEDI Claims Sub Workgroup. Principal, Nachimson Advisors
- Charles Veverka, Co-Chair, WEDI Claims Sub Workgroup. Senior QA Manager, Kunz, Leigh & Associates
- Beth Davis, Co-Chair, WEDI Claims Sub Workgroup. Senior Manager, Payerpath - Veradigm

Key Considerations for the Implementation of Prior Authorization API Requirements in CMS 0057-F

9:30am – 10:15am

- Robert Bowman, Principal, Interoperability and Standards, CAQH
- Rachel Goldstein, Vice President, CAQH CORE

Morning Networking Break

10:15am – 10:30am

CMS National Standards Group Small Group Exercise

10:30am – 12:00pm

The National Standards Group (NSG) will host a listening session to solicit input on feedback garnered from WEDI's survey regarding updates in X12's version 8020 for the claims and ERA transactions. NSG hopes to gain a better understanding of the expected business impact from the updates in this latest version from X12.

- Michael Cimmino, Director, National Standards Group, Office of Burden Reduction & Health Informatics, Centers for Medicare & Medicaid Services
- Kathleen McGinty, JD, Senior Advisor, Office of Burden Reduction & Health Informatics, Center for Medicare & Medicaid Services

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